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	Substitute for Form PTO-875								Application or Docket Number		
				LAIMS AS FILED - PART I (Column 1) (Col			SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	FOR		NUME	NUMBER FILED		IMBER EXTRA	RATE	FEE]	RATE	FEE
	BASIC FEE (37 CFR 1.16(a))			(\$	OR	10012	s
		TAL CLAIMS CFR 1.16(c))	14				x \$=		OR	x \$ =	
	INDEPENDENT CLAIMS (37 CFR 1.16(b))		MS 2	minus 3 =			× \$=		OR	× \$ =	
	MU	LTIPLE DEPENDE	NT CLAIM PRESE	LAIM PRESENT (37 CFR 1.16(d))					OR	+s_ =	
	* If	the difference in	column 1 is less th	1 is less than zero, enter "0" in column 2.			TOTAL		OR	TOTAL	
	CLAIMS AS AMENDED - PART II								-		
2104		ANE.	(Column 1)			2) (Column 3)	SMALL I	ENTITY	OR •	OTHER THAN SMALL ENTITY	
	ENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSI PAID FOR	PRESENT LY EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
		Total (37 CFR 1.16(c))	12	Minus	20		x \$=		OR	× \$=	
Ĭ \	MEN	Independent (37 CFR 1.16(b))	2	Minus	ت	3 -	x \$=		OR	× \$=	
\	A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$=		OR	/ s=	
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
	(Column 1) (Column 2) (Column 3)								,		
	ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSL PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Σ	Total (37 CFR 1.16(c))	•	Minus	**	=	x \$=		OR	x \$=	
	AMENDMENT	Independent (37 CFR 1.16(b))	*	Minus	***	=	× \$=		OR	x \$=	
- 1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)					7 CFR 1.16(d))	+ \$=		OR	+ \$=	
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
ļ			(Column 1)		(Column 2	(Column 3)					
	ENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSL PAID FOR		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
]	DMI	Total (37 CFR 1.16(c))	*	Minus	**	=	x \$=		OR	x \$=	
ĺ	AMENDMEN	Independent (37 CFR 1.16(b))	•	Minus	***	=	x \$=		OR	x \$=	
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							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
	•	" If the "Highest I	Number Previously	Paid For	IN THIS SPACE	write "0" in column 3 CE is less than 20, e CE is less than 3, en	enter "20".			•	
į		The "Highest Nu	mber Previously	Paid For (Total or Indepe	endent) is the highes	st number found in	the appropriate	e box in co	olumn 1.	

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.